

North Fylde Care Ltd

Fairhaven Care Home

Inspection report

43-44 Laidleys Walk
Fleetwood
Lancashire
FY7 7JL

Tel: 01253772341

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07 December 2023

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18 January 2024

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Fairhaven Care Home is located on the promenade at Fleetwood. The home accommodates 22 people. Appropriate aids are provided to promote independence and a passenger lift enables ease of access throughout the building. At the time of the inspection 20 people lived at Fairhaven Care Home.

People's experience of using this service and what we found.

We found the premises clean and tidy and maintenance checks were in place and up to date. Safe recruitment procedures were in place. There were sufficient staff to care for people. One person said, "I don't have to wait if I need someone for help or anything." Safeguarding training was provided annually and updated. Risks were assessed and monitored to ensure individuals safety and promoted their independence. People received their medicines safely.

The management team had auditing systems to maintain ongoing oversight of Fairhaven Care Home. Quality assurance processes ensured people were able to give their views and opinions of the service and felt listened to.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating at this service was good (published 24 February 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Fairhaven Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Fairhaven Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of the inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced. The inspection activity started on 07 December and ended on 11 December 2023. The site visit was on 07 December 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and commissioners who work with the service. We also looked at information we had received and held on our system about the home, this included notifications sent to us by the provider and information passed to us by members of the public. The provider was not asked to complete a Provider

Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who lived at the home 2 relatives, 4 members of staff, the registered manager and provider. In addition, we spoke with a visiting health professional. We observed staff interaction with people, also, we reviewed a range of records. These included care records of people, medication records, and staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service. We walked around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at their quality assurance systems the provider had in place and staff training records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection, this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager assessed risks to ensure people were safe.
- The registered manager and staff promoted positive risk taking to help people gain skills and live an independent life as possible.
- Environmental risks were identified and addressed, and systems were in place to carry out regular safety related checks on essential equipment.
- Accidents and incidents were analysed to look for how a reoccurrence could happen. Action was taken to reduce the risk of accidents.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and confident with staff that cared for them. One person said, "The staff are great, and it makes me feel safe and secure here."
- There were effective safeguarding processes in place. The management team and staff had a good understanding of safeguarding people. They understood their responsibilities for keeping people safe and the processes for reporting any concerns.
- Staff undertook safeguarding training to ensure they had the required knowledge.

Staffing and recruitment

- Sufficient staff were deployed to ensure people were cared for. Staff spoken with confirmed they were happy with the number of staff on duty to support people.
- Staff recruitment processes were good and thorough. Records confirmed all checks had been completed

prior to staff commencing work. One staff member said, "It was a good process and I felt I was more confident after the induction training."

Using medicines safely

- Records for the receipt, administration and disposal of medicines were kept. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required. People received their medication safely by trained staff.
- Auditing processes to monitor medicines and identify any issues were undertaken regularly.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- The provider was ensured infection outbreaks could be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- People were able to receive visitors without restriction, in line with best practice guidance.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection, this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

Continuous learning and improving care; working in partnership with others

- The management team and staff worked well with other health and social care professionals for the benefit of people who lived at the home.
- Professionals told us they had very good communication with staff and the registered manager who were competent and caring. One health professional said, "I come every day, and the staff and manager are very competent. I have no issues concerning the residents they are so well cared for."
- The provider and registered manager were committed to continuous improvements to the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a positive culture throughout the home which focussed on ensuring people received high standards of care. One person said, "I make my own decisions, but staff are always around to help and encourage me to be independent as possible."
- Staff told us they felt supported and valued by the registered manager. A staff member said, "I have nothing but praise for [Registered manager] she has been so supportive."
- People and their relatives were comfortable and confident when approaching staff and the registered manager to express their views.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements;

- The registered manager was supported by staff who were well trained and understood their responsibilities for delivering care for people. One person said, "They know what they are doing here the staff are brilliant."
- The management team had established systems for monitoring the quality and safety at Fairhaven Care Home. They were aware of their regulatory responsibilities.
- The registered manager had systems to monitor the quality and safety of service. The management team carried out audits of the service and reported their findings and action taken to the provider.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The staff team promoted a positive, personalised and open culture. This helped and supported positive outcomes for people.
- The registered manager was visible in the home. They supported people who lived at the home and worked there.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager encouraged candour through openness.
- The registered manager and provider had been open and honest when things went wrong and apologised to people when appropriate.